

Application For Radionuclide Authorization

<i>Applicant's Name (Last, First, M.I.)</i>		<i>ICD</i>		<i>Bldg./Room</i>		<i>Phone #</i>		<i>RSB Number</i>	
Purpose of Application	NEW <input type="checkbox"/> RE-AUTHORIZATION <input type="checkbox"/>								
	LABORATORY AUTHORIZATION <input type="checkbox"/>								
	IRRADIATOR CUSTODIAN <input type="checkbox"/>								
	LIMITED AUTHORIZATION <input type="checkbox"/> → EXPLAIN:								
Training	NIH <input type="checkbox"/> OTHER <input type="checkbox"/> TYPE/WHERE/DURATION:								
Experience With Radiation (Actual use of radionuclides or equivalent experience)	NUCLIDE	TYPICAL AMOUNTS USED	WHERE EXPERIENCE WAS GAINED		DURATION OF EXPERIENCE <small>(wks., mos., yrs.)</small>	TYPE OF USE <i>(Give brief description)</i>			
						LABORATORY		CLINICAL	
Applicant's Signature	<i>I certify that the statements made above are true, complete, and correct to the best of my knowledge.</i>				<i>Signature of Applicant</i>		<i>Date</i>		

FOR RADIATION SAFETY DEPARTMENT USE ONLY

Training Verification	RSAU <input type="checkbox"/> RSL <input type="checkbox"/>		<i>Initial</i>	<i>Signature (RSO Approval)</i>		<i>Date</i>
This application:	<input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED	<i>Reason</i>		<i>Signature (Radiation Safety Committee Chairperson)</i>		<i>Date</i>

PRIVACY ACT STATEMENT. The information collected by this form is essential for maintenance of records for employees potentially exposed to ionizing radiation, as required by the Code of Federal Regulations, Title 10, Parts 19 and 20, by U.S. Nuclear Regulatory Commission Materials Licenses granted to NIH. Certain information is protected by the Privacy Act of 1974. HHS/NIH/ORS 09-25-0166 documents the system of records in which this information is used. Providing your social security account number and birth date (if requested) is voluntary, however, failure to provide these items may result in your not being permitted to work in areas using radioactive materials. The information collected is used in a system of records to track your radiation exposure, use of radioactive materials, and training in radiation safety. The primary users of this information are the staff of the Radiation Safety Branch, NIH. Routine uses may also include disclosure of some information provided on this form to a new employer, to contractors who assist or provide service to the Radiation Safety Branch in performing its functions, to the Nuclear Regulatory Commission, to the Congress of the United States, or if necessary to defend the Government or an employee of DHHS in a lawsuit.